

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5						
6						
7						
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11						
12						
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16						
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18						
19						
20						
21						
22						
23						
24						
25	1					
26		1				
27		1				
28		1				
29		1				
30		1				
31		1				
32		1				
33		1				
34	1					
35		1				
36		1				
37		1				
38	1					
39		1				
40		1				
41		1				
42		1				
43		1				
44	1					
45	1					
46						
47						
48						
49						
50						
TOTAL IND.	5					
TOTAL DEP.	16					
TOTAL CLAIMS	21					

CLAIMS	IND		DEP		IND		DEP	
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
51								
52								
53								
54								
55								
56								
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99								
100								
TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								